PTOISENG (08-03)
Approved for use through 7/3 U2005, ONIS 0651-0032
U.S. Patient and Trademark Office; U.S. DEPARTMENT OF COMMERCE

	ATENT APP	LICATION		RMINATIO	N RECORD		Applica	7/50	rober
CLAIMS AS FILED - PART I (Column 1) (Column 2)					SMALL ENTITY		CR	OTHER THAN SMALL ENTITY	
FOR MUNISER FILEO		MBER FILEO	MUMBER EXTRA		. RATE	FEE		RATE	FEE
BASIC FEE (DF CFR 1.15(4))						<b>s</b> _	<b>C</b> R		£
TOTAL CLAIMS (37 OFR 1.15(4)		csinus 20			× 1 =		<b>CR</b>	x +=	
MOEPENDENT ( (37 CFR 1.15(b))	LAMS	orbus 1			x 1 •		OR	× 4 •	
BULTIPLE DEPENDENT CLAIMPRESENT (37 CFR 1.16(0))					••_•		OR	+1	
"If the difference is column 1 is tess than zero, writer "I" in column 2.					TOTAL		OR	TOTAL	
	CLAIMS AS	MENDED	- PART II	•	•				
9-220	(Cotumn 1)		(Coturno 2)	(Cotumn 3)	SMALL	ENTITY	OR		R THAN ENTITY
, 400	CLAINS		HIGHEST NUMBER	PRESENT	RATE	ADOS-	}	RATE	ADOI-
EN	AFTER AMENDME		PREVIOUSLY PAID FOR	EXTRA		TIONAL FEE	1		FEE.
5 100		Minus	" 48	<u> </u>	x 1		<b>C</b> R	x 5	
(1) Out ('nt)	2	Mirrus	6		X 8=		OR	× s	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.14(17)) + 5 = CR + 5 = 2									
MI	11)(0				TOTAL ADO'L FEE		OR	TOTAL ADOL FEE	<u> </u>
110	CLAILIS		(Coturn 2) HIGHEST	(Cotuma 3)		· · · · · ·	1		
EN -	REMAININ AFTER AMEMBME		NUMBER PREVIOUSLY PAIDEOR	PRESENT EXTRA	RATE	ADONAL TIONAL FEE		RATE	ADDI- TIONAL FEE
Total profession		Minus	45	•	xa		OR	x i	
Distriction		Minus	9	• /	x s=		OR	X 9	/
FERST PRE	SENTATION OF MUL	NPLE DEPEND	ENT CLANS (SF CF	A 1.18(0))	1/		OR	+8	
101	19/0	6			TOTAL, ADDL FEE		OR	TOTAL ADOL FEE	
<del></del>	/(Column 1)	1	(Catumn 2) HIGHEST	(Calumn 3)		ı	1	<del>k</del>	
ENT	REMAININ AFTER AMENDME	`	PREVIOUSLY PAID FOR	PRESENT	RATE .	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total Or ora 1,144 Z Independent U 07 074 1,146	1.7	Minus	-48	.6	×5		OR	× 4	V
U properties	2	Minus	- 6	17)	X 5 =		OR	x 4=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (D7 OFR 1.18(df)) +5 OR +5									
					TOTAL ADO'L FEE		OR	TOTAL ADD'L FEE	
" If the Tig! "If the Tig!	y in column 1 is les Nest Nutriber Previ Nest Nutriber Previ	ously Paid For ously Paid For	IN THIS SPACE IN THIS SPACE	is tess than 20, Is tess than 3, o	, erter "20".		- 	<i>/</i>	

The "Highest Humber Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The Information is required to obtain or retain a benefit by the public which is to file (and by the USFTO to process) an application, Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, indusing gathering, preparing, and automiting the completed application form to the USFTO. There will vary depending upon the individual case. Any comments on the amount of time you require to complete this form another suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Department of Commerce, P.O. Box 1450, Necandia, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.